_	. , '5	Application of Docket Number PPLICATION FEE DETERMINATION RECORD										
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 09/972,756												56
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL I	•	OR	OTHER	R THAN ENTITY
TOTAL CLAIMS						•	[RATE	FEE]	RATÉ	FEE
FOR			NUMBER FILED .		NUMB	ER EXTRA		BASIC FE	E 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			minus 20=		•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =				l t	X43=	1.	OR	VOC	
MU	LTIPLE DEPEN	DENT CLAIM PR					lt	+145=	1	7	:	
• ir	* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	<u></u>	-
•								TOTAL	<u> </u>	OR		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR		THAN ENTITY
NT A		CLAIMS REMAINING AFTER AMENDMENT	HIGH NUM PREVIO PAID		EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMEN	Total		Minus		0	-21		X\$ 9=	189	OR	X\$18=	
NEW	Independent	-5	Minus	***	/_	- /]	X48/	44	OR	VOS	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM	X	1	+145=		OR		
							L	TOTAL		OR	TOTAL	•
	(Column 1) (Column 2) (Column 3)								: !	1011	ADDIT. FEE	
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT	, skands	HIGH NUMI	EST BER DUSLY.~	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	. 41	Minus	- 4	41	=		X\$ 9=		OR	X\$18=	
AME	Independent	. 5	Minus	###	5		\prod	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT GLAIM							+145=		OR	+290=	
(15.04.05)-00							L	TOTAL		OR	TOTAL ADDIT, FEE	•
		(Calumn 1)	.* .	(Colum	กก 2)	(Column 3)				_		
NTC	1/20/06	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
OME	Total	1//	Minus	- 41		=	1	X\$ 9=	1	ОЯ	X\$18=	
AMENDMEN	Independent	• 8	Minus	~ 5		2	11	X43=	1	1	100	1
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM		17		 	OR		
+145= \ OR +290=												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 10/03)